24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Citizens 4 Ethics in Government	C C00524082
	M M / D D / Y Y Y Y
Check if X 24-hour report 48-hour report New report Amends report file	
Full Name of Payee Gill Media	Date of Public Distribution/Dissemination
	07 24 2014
Mailing Address 1616 Westgate Circle	Amount
City State Zip Code	20000.00
Brentwood TN 37027	Transaction ID : SE.4232 Date of Disbursement or Obligation
Purpose of Expenditure Media Expense Category/ Type	07 / 24 / 2014
Name of Federal Candidate Support Office	ce Sought: House District: 00
JOE S CARR Oppose	President Senate State: TN
Calendar Year-To-Date Per Election for Office Sought Dist 259920.00	bursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Gill Media	07 24 Y 2014
Mailing Address 1616 Westgate Circle	Amount
City State Zip Code	15000.00
Brentwood TN 37027	Transaction ID : SE.4235 Date of Disbursement or Obligation
Purpose of Expenditure Media Expenses Category/ Type	07 24 7 2014
	ce Sought: House District: 00
SCOTT EUGENE DESJARLAIS Oppose	President Senate State: TN
Calendar Year-To-Date Per Election for Office Sought Disl 274920.00	bursement For:
(a) CURTOTAL of Itamized Independent Expanditures	35000.00
(a) SUBTOTAL of Itemized Independent Expenditures	35000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Michael Leisey [Electronically Filed] Date	07 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	